

PCT

REQUEST

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.

PCT/EP 2004 / 011699
International Application No.
<div style="display: flex; justify-content: space-between;"> 16 OCT 2004 (16.10.04) </div>
EUROPEAN PATENT OFFICE PCT INTERNATIONAL APPLICATION Name of receiving Office and "PCT International Application"
Applicant's or agent's file reference (if desired) (12 characters maximum) O1P108WO

Box No. I TITLE OF INVENTION A pipe segment for a transfer line for transporting hot particulate material	
Box No. II APPLICANT	
Name and Address: (Family name followed by given name: for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) Outokumpu Oyj Riihitontuntie 7 02200 Espoo Finland	<input type="checkbox"/> This person is also inventor. Telephone No. Facsimile No. Teleprinter No.
State (that is, country) of nationality: FI	State (that is, country) of residence: FI
This person is applicant for the purpose of: <input type="checkbox"/> all designated States <input checked="" type="checkbox"/> all designated States except the United States of America <input type="checkbox"/> the United States of America only <input type="checkbox"/> the States Indicated in the Supplemental Box	
Box No. III FURTHER APPLICANT(S) and/OR (FURTHER) INVENTOR(S)	
Name and Address: Technological Resources Pty. Limited 55 Collins Street Melbourne, Victoria 3000 Australia	This person is: <input checked="" type="checkbox"/> applicant only <input type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.)
State (that is, country) of nationality: AU	State (that is, country) of residence: AU
This person is applicant for the purpose of: <input type="checkbox"/> all designated States <input checked="" type="checkbox"/> all designated States except the United States of America <input type="checkbox"/> the United States of America only <input type="checkbox"/> the States Indicated in the Supplemental Box	
<input checked="" type="checkbox"/> Further applicants and/or (further) inventors are indicated on a continuation sheet	
Box No. IV AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE	
The person identified below is hereby/has been appointed to act on behalf of the applicant(s) before the competent International Authorities as: <div style="float: right;"> <input checked="" type="checkbox"/> agent <input type="checkbox"/> common representative </div>	
Name and address: Keil & Schaaflhausen Cronstettenstraße 66 60322 Frankfurt am Main Germany	Telephone No. 069-959623-0 Facsimile No. 069-959623-50 Teleprinter No.
<input type="checkbox"/> Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.	

Continuation of Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)				
If none of the following sub-boxes is used, this sheet should not be included in the request.				
Name and Address: Hoffhaus, Karsten Wiesenstraße 12a 49685 Emstek Germany			This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below)	
State (that is, country) of nationality: DE		State (that is, country) of residence: DE		
This person is applicant for the purpose of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box				
Name and Address: Kazmeier, Günther Rostocker Straße 22 61130 Nidderau Germany			This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below)	
State (that is, country) of nationality: DE		State (that is, country) of residence: DE		
This person is applicant for the purpose of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box				
Name and Address: Flores-Verdugo, Marco Aurelio Diego de Arana 149 Cumbres 4 Sector Monterrey Mexico			This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below)	
State (that is, country) of nationality: MX		State (that is, country) of residence: MX		
This person is applicant for the purpose of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box				
Name and Address:			This person is:	
			<input type="checkbox"/> applicant only <input type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below)	
State (that is, country) of nationality:		State (that is, country) of residence:		
This person is applicant for the purpose of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box				
<input type="checkbox"/> Further applicants and/or (further) inventors are indicated on another continuation sheet.				

Sheet No. 3

Box No. V DESIGNATION OF STATES / Box No. V DESIGNATIONS

The filing of this request constitutes under Rule 4.9(a), the designation of all Contracting States bound by the PCT on the international filing date, for the grant of every kind of protection available and, where applicable, for the grant of both regional and national patents.

However,

- ☐ DE Germany is not designated for any kind of national protection
- ☐ KR Republic of Korea is not designated for any kind of national protection
- ☐ RU Russian Federation is not designated for any kind of national protection

(The check-boxes above may be used to exclude (irrevocably) the designations concerned in order to avoid the ceasing of the effect, under the national law, of an earlier national application from which priority is claimed. See the Notes to Box No. V as to the consequences of such national law provisions in these and certain other States.)

Box No. VI PRIORITY CLAIM ☐ Further priority claims are indicated in the Supplemental Box.

Filing date of earlier application (day/month/year)	Number of earlier application	Where earlier application is:		
		national application: country	regional application:* regional Office	international application: receiving Office
Item (1) 21. October 2003 (21.10.2003)	2003905978	AU		
Item (2)				
Item (3)				
Item (4)				

The receiving Office is requested to prepare and transmit to the International Bureau a certified copy of the earlier application(s) (only if the earlier application was filed with the Office which for the purposes of the present international application is the receiving Office) identified above as:

☐ all items ☐ item (1) ☐ item (2) ☐ item (3) ☐ item (4) ☐ other, see Supplemental Box

* Where the earlier application is an ARIPO application, it is mandatory to indicate in the Supplemental Box at least one country party to the Paris Convention for the Protection of Industrial Property for which that earlier application was filed (Rule 4.10(b)(ii)). See Supplemental Box.

Box No. VII INTERNATIONAL SEARCHING AUTHORITY

Choice of International Searching Authority (ISA)
ISA/EP

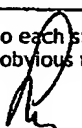
Request to use results of earlier search; reference to that search (if an earlier search has been carried out by or requested from the International Searching Authority):

Date (day/month/year)

Number

Country (or regional Office)

Sheet No. 4

Box No. IX CHECK LIST; LANGUAGE OF FILING	
<p>This international application contains the following number of sheets:</p> <p>request: 4</p> <p>description (excluding sequence listing part): 18</p> <p>claims: 6</p> <p>abstract: 1</p> <p>drawings: 8</p> <p>sequence listing: *</p> <p>part of description: -----</p> <p>Total number of sheets : 37</p>	<p>This international application is accompanied by the item(s) marked below::</p> <p>1. <input checked="" type="checkbox"/> fee calculation sheet</p> <p>2. <input type="checkbox"/> separate signed power of attorney</p> <p>3. <input checked="" type="checkbox"/> copy of general power of attorney; reference number, if any: 44892</p> <p>4. <input type="checkbox"/> statement explaining lack of signature</p> <p>5. <input type="checkbox"/> priority document(s) identified in Box No. VI as item(s):</p> <p>6. <input type="checkbox"/> translation of international application into (language):</p> <p>7. <input type="checkbox"/> separate indications concerning deposited microorganisms or other biological material</p> <p>8. <input type="checkbox"/> nucleotide and/or amino acid sequence listing in computer readable form</p> <p>9. <input type="checkbox"/> other (specify):</p>
<p>Figure of the drawings which should accompany the abstract: *</p>	<p>Language of filing of the international application: English</p>
<p>Box No. X: SIGNATURE OF APPLICANT, AGENT OR COMMON REPRESENTATIVE</p>	
<p>Next to each signature, indicate the name of the person signing and the capacity in which the person signs (if such capacity is not obvious from reading the request).</p> <p style="margin-left: 40px;"></p> <p>.....</p> <p>Nanno M. Lenz (Association No. 124)</p>	

For receiving Office use only	
<p>1. Date of actual receipt of the purported international application: 16 OCT 2004 (16. 10. 04)</p> <p>3. Corrected date of actual receipt due to later but timely received papers or drawings completing the purported international application:</p> <p>4. Date of timely receipt of the required corrections under PCT Article 11(2):</p>	<p>2. Drawings:</p> <p><input checked="" type="checkbox"/> received:</p> <p><input type="checkbox"/> not received:</p>
<p>5. International Searching Authority (if two or more are competent): ISA/</p>	<p>6. <input type="checkbox"/> Transmittal of search copy delayed until search fee is paid.</p>

For International Bureau use only
<p>Date of receipt of the record copy by the International Bureau:</p>